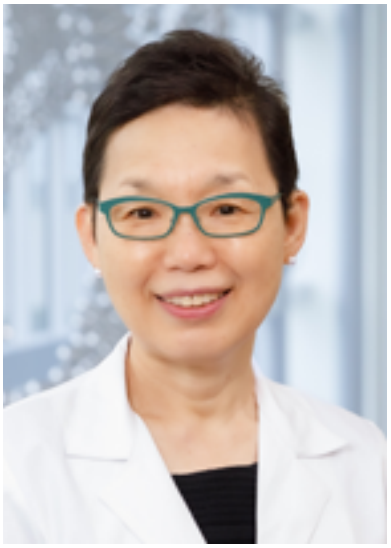
UT Southwestern
Medical Center

Department of Physical
Medicine & Rehabilitation

PM&R

CONNECTION

WINTER-SPRING 2025



Heakyung Kim, MD

Chair of Physical Medicine and Rehabilitation
Kimberly-Clark Distinguished Chair in Mobility Research

As we begin a new calendar year, I want to take a moment to reflect on our department's achievements over the past year and express my heartfelt gratitude to each member of our team for their hard work and dedication.

1. Reflecting on Clinical Excellence and Growth

I am proud to highlight the clinical milestones our department has achieved. With 103 inpatient beds across Zale Lipshy, Parkland, Texas Health Presbyterian Hospital Dallas (THD), and Children's Health as Zale Lipshy inpatient is expanded to 47 beds, and over 1,500 monthly procedures, we continue to lead the way in delivering exceptional care.

2. Strategic Planning and Expansion

As we prepare the FY26 budget, our priorities include further investment in expanding MSK/Sports and Pain programs, which have already shown tremendous potential, as well as Stroke Rehabilitation Programs as part of the OBI Neuroscience Program. These initiatives align with the institutional strategic plans. Additionally, programs like pelvic rehabilitation and services for individuals with childhood-onset disabilities will remain central to our mission.

We are also revamping the Division of Pediatric Rehabilitation Medicine (PRM) at Children's Health, with Dr. Srinivasan newly appointed as Director of PRM. This marks an exciting new chapter in advancing pediatric rehabilitation care and strengthening our collaboration with Children's Health to serve young patients with complex rehabilitation needs.

3. Research and Innovation Highlights

Our research initiatives continue to thrive, reflecting the department's growing presence in impactful clinical and translational research. We are actively contributing to federal grant-funded studies and serving as a central hub for spasticity management clinical trials, including investigations into botulinum toxin and cryoneurolysis.

The department also has a strong focus on autonomic nervous system (ANS) research, with ongoing projects exploring the role of the ANS in traumatic brain injury. Notably, a multi-center clinical trial is underway to evaluate IVIG as a treatment for postural orthostatic tachycardia syndrome (POTS) in patients with COVID-19.

Other major research endeavors include advancing biomarkers for glioblastoma, neuromodulation to improve rehabilitation outcomes, and leading innovative clinical trials in ALS. These efforts demonstrate our leadership in pioneering treatments and therapies that align with our mission of advancing care through evidence-based research.

4. Education and Faculty Development

We are committed to shaping the future of PM&R through outstanding education. Trainee evaluations reflect high satisfaction, and our residents are excelling with competitive fellowship matches. The continuous development of our faculty remains a top priority, with new initiatives in mentorship and professional growth.

Our reputation as a leading PM&R department continues to grow. Through clinical, research, and educational excellence, we aim to set a standard that reflects our shared vision and values.

Thank you to all our faculty, staff, and trainees for their unwavering dedication. Together, we are not only meeting but exceeding expectations, advancing the field of PM&R for the benefit of the patients and communities we serve.

Warm regards,

Heakyung Kim, MD

PM&R CONNECTION

WINTER-SPRING 2025

FEATURE

PAGE 5 | EXPLORING THE UTSW MULTIDISCIPLINARY PAIN CLINIC

ON THE COVER

Wheelchair basketball game at the 2024 Adaptive Sports Expo

2024 Adaptive Sports Expo

Amanda Seemann, DO

Each year during the fall, the UTSW DFW Adaptive Sports Coalition hosts the UTSW Adaptive Sports Expo at the University of Texas at Arlington. Since its inception eight years ago, this expo highlights the various adaptive sports organizations and resources available to those of all ages in the DFW metroplex and in North Texas. This year's theme embodied the spirit of the Paralympic Games since the games took place in Paris a couple weeks before the expo.

Throughout the day, several different adaptive sports organizations showcased the types of sports and activities they have to offer. Participants were able to partake in adaptive sled hockey, wheelchair lacrosse, amputee soccer, wheelchair fencing, wheelchair basketball, blind soccer, wheelchair dance, and adaptive climbing. By far, the biggest hit of the day on the courts was wheelchair tennis and para pickleball/wheelchair pickleball hosted by the Dallas Wheelchair Tennis Club and Para Pickleball Program. The athletes had a blast playing these different sports on the day of the event and hopefully will continue to participate with these organizations in the future.

Other non-sport organizations came out and showed their support for the expo and the athletes by exhibiting the resources available for those with disabilities. These groups offer resources with rehabilitation and medical needs, adaptive equipment, prosthetics and orthotics, and community outreach. Many participants, exhibitors, and volunteers alike were enamored by the miniature therapy horses from the Mini Hooves of Love organization.

Pictured, from left to right: Amanda Wise, DO, Amanda Seemann, DO, Alia Hemeida, MD, Mia Robb-Stahler, DO, and Donald Kasitinon, MD

The main highlight of the day was the Paralympian panel that took place over the lunch hour. The panel included 5 Paralympians from UTA and other schools/organizations in the DFW area who were able to speak on their experiences in adaptive sports and as a Paralympian. Each athlete had a unique story to tell, and all of them kept the audience at the edge of the seats wanting to learn more. It was a truly impactful event that inspired the next generation of adaptive athletes to achieve their full potential.

The 8th annual UTSW Adaptive Sports Expo has been the biggest event since its inauguration. There was a record turnout with over 430 participants and 31 exhibitors! The influence of this event has grown throughout the years, and with that, it's given adaptive athletes the chance to participate in an assortment of sports and be connected to a larger community. This extraordinary event couldn't have happened without the support of the UTSW Adaptive Sports Coalition, the volunteers, and the UTA community. It was truly an incredible event to be a part of.

Zale Lipshy Renovations

Beginning in June 2023, an extensive renovation kicked off at Zale Lipshy Pavilion to modernize building infrastructure, update surgical and rehabilitation areas, improve interior finishes, and enhance the surrounding campus to improve accessibility for the mobility challenged. A majority of the project completed in December 2024. While most of the renovation work is occurring behind the walls, a few areas will have noticeable changes:

Toni-kay Gordon

Outpatient Rehabilitation Therapy: In the first-floor Musculoskeletal (MSK) Gym, two previously separate gym areas were combined into a larger area with a shared patient reception desk, and upgraded with new floorplan, finishes and flooring.

Inpatient Rehabilitation: The fourth-floor inpatient gym has updated finishes, including a new floor. The renovated gym added a gait track to provide patients with an even safer environment for gait training. It will also provide feedback to help personalize therapy for effective rehabilitation. Through the renovation, we added an ADL apartment, which simulates living spaces that allow patients to practice doing everyday tasks in a safe, supportive, home-like setting once discharged. The gym also will include a nurse call system to ensure quick access to assistance when needed.

Shelby Tesdall, MD

Dialysis: Expanded space to allow the treatment of two patients simultaneously, increasing service capacity.

Surgical Services: The pre- and post-operative surgical areas, operating rooms, and staff support spaces at Zale Lipshy were expanded, completely updated, and reformatted according to the organization's standards and technologies.

Nutrition Services: The new dining services area on the first floor re-opened in the Fall of 2024 with new finishes and flooring and reformatted to create an open concept while providing additional ADA-friendly enhancements for mobility impaired patients.

Hospital renovations, much like home renovations, do not occur without surprises and headaches. Luckily our fantastic physicians and staff have been able to be flexible and agile when the unexpected occurred (e.g. plumbing issues, lab and dietary services moving to a different location, a TJC Survey). We are now done with renovations and have expanded our total licensed beds to 47 for inpatient rehabilitation. This allows us to serve more patients and continue to provide the best rehabilitation care for our community. We are excited to be in our new space and start the next chapter of inpatient rehabilitation care at UT Southwestern!

Zale Lipshy Inpatient Rehabilitation Gym

Exploring the UTSW Multidisciplinary Pain Clinic

Mia Robb-Stahler, DO

Denizen Kocak, MD

Chaitanya Konda, DO

Amol Patwardhan, MD, PhD

Recently, our PGY-3 Mia Robb Stahler, DO interviewed providers in UTSW's Multidisciplinary Pain Clinic. Below are the interview sessions with Denizen Kocak, MD and Chaitanya Konda, DO from PM&R and Amol Patwardhan, MD, PhD from Anesthesia.

Q: First, for those unfamiliar, how would you describe the Multidisciplinary Pain Clinic?

Dr. Patwardhan: When I arrived here, it was clear that many patients with chronic pain were being sent to different specialists for various issues. This fragmented care often led to confusion, medication mismanagement, and, in some cases, over-treatment or duplication of therapies.

Pain is a complex issue, often involving physical, psychological, and social factors. The biopsychosocial model we employ ensures we address all these dimensions. For instance, we don't just focus on physical pain but also incorporate psychological support through our in-house pain psychologists.

Dr. Kocak: I would agree that it is a true multidisciplinary pain clinic with the aim of treating all patients who have pain. We're a team of six board certified pain medicine physicians from diverse backgrounds—neurology, PM&R, and anesthesiology—working together to treat patients. Most commonly, patients will have musculoskeletal pain, neuropathies and the less common conditions like facial pain and CRPS. We offer a full range of treatment modalities, including physical therapy, medication management, procedural interventions, psychologist, and referrals to surgeons when necessary.

Q: What stands out about this clinic, in your opinion?

Dr. Kocak: Our diverse team of board-certified pain management physicians allows us to offer a very comprehensive evaluation of a patient's pain, no matter where it originates. We provide a one-stop-shop experience. One of our biggest assets is having pain psychology embedded directly in the clinic, which is a tremendous resource for patients.

Dr. Patwardhan: One thing I want to emphasize is that pain management clinics, especially multidisciplinary ones like ours, play a critical role in reducing the societal burden of opioids. There's a misconception that pain clinics simply take over opioid prescriptions. In reality, we're often able to taper patients off opioids while improving their pain and function. It requires a dedicated team and motivated patients, but it's absolutely possible.

Q: Research seems to be a major focus of the clinic. Can you tell us about it?

Dr. Konda: Yes, research is a big part of what we do. Dr. Patwardhan, who leads the

clinic, dedicates 50% of his time to research. The long-term goal is to expand our research projects and offer patients more advanced and innovative options.

Currently, we're involved in studies that include:

Dorsal root ganglion sampling: We collect samples during transforaminal steroid injections and analyze components to understand why certain areas generate pain.

Circulation studies: We examine circulation changes pre- and post-stellate ganglion blocks, focusing on potential benefits for acute stroke patients.

These projects aim to refine our understanding of pain and improve treatment strategies.

Q: What role does pain psychology play in the clinic?

Dr. Konda: Pain psychology is a crucial component of what we offer. Patients struggling with coping skills or who would benefit from CBT can work with our psychologists. I've had patients specifically request to see a pain psychologist, and having that resource makes a significant difference.

Dr. Patwardhan: Additionally, we work closely with addiction psychiatry and other specialties. While they're not physically housed in the clinic yet, we're striving to integrate them more fully to offer seamless care. Having specialists from different disciplines allows us to collaborate on complex cases, ensuring patients receive the best possible treatment.

The **Multidisciplinary Pain Clinic** is located in the Seay Building, which is the old Simmons Cancer Center on the North Campus.

2201 Inwood Road, 3rd Floor
NC3.140
Dallas, TX 75390

It's open five days a week, with different doctors holding clinic on different days of the week.

Q: The integration of addiction psychiatry is such an important element. How does your clinic navigate the challenge of opioid use in chronic pain management?

Dr. Patwardhan: Managing opioid therapy requires both science and art. We aim to use opioids as little as possible while still addressing patients' pain and improving their function. Our goal is not to eliminate opioids entirely but to use them judiciously. We employ validated tools, such as the opioid risk tool, and monitor for risk factors like sleep apnea, which increases the likelihood of overdose. At the same time, we educate patients about their options and establish realistic expectations. In a study I published in Pain Medicine, we reduced patients' opioid usage by over 50% while improving their pain levels by more than 30%. It's not easy, but with dedication from both patients and providers, it's achievable.

Q: That's remarkable. It must be incredibly rewarding to help patients improve their quality of life in such meaningful ways. Do you see opportunities for residents and fellows to get involved in the clinic?

Dr. Patwardhan: Definitely. While we're still in our early stages, but as we grow, training the next generation of pain specialists will become a priority. We want residents and fellows to learn in a setting where they can experience the full spectrum of pain management—from procedures to medication management to psychological support.

Q: How does someone refer a patient to the clinic?

Dr. Konda: Referrals can be made through the multidisciplinary pain clinic referral/consult order in Epic. External patients can also call 469-852-0110 on their own.

Q: Thank you all for sharing these insights!

Dr. Patwardhan: We're here not just to treat pain but to empower patients, improve their lives, and contribute to the advancement of pain medicine. I'm incredibly proud of what we've built at UT Southwestern and look forward to continuing this important work. Thank you!

Dr. Kocak, Dr. Konda: Thank you!

New Directors

Amy Mathews, MD

INPATIENT REHABILITATION UNIT AT THD

Amy Mathews, MD has recently joined Texas Health Presbyterian Dallas Hospital (THD), where she has taken on the role of Medical Director of the Inpatient Rehabilitation Unit which currently is 20+ beds. She is also developing the PM&R consultation service to enhance rehabilitation care across the hospital. THD is a Designated Level 1 Trauma Center and Comprehensive Stroke Center. In her new role, Dr. Mathews is committed to fostering collaboration among the PM&R team and creating clinical pathways to elevate patient outcomes. Her training in Brain Injury Medicine and her years of working at Parkland has made the transition to THD easy. Along with Dr. Raymond Cheng and APP's Jessica Co, PA and Martha Magnum, NP, she provides physiatric care at this site that is run by the UTSW PM&R department. A senior PM&R resident also still rotates through the site.

Dr. Mathews is thrilled to bring her expertise to THD and looks forward to contributing to its culture of excellence in patient care.

Texas Health Presbyterian Dallas PM&R Team, from left to right: Dr. Amy Mathews, Marty Magnum, NP, Jessica Co, PA, and Dr. Raymond Cheng

Rajashree Srinivasan, MD

PEDIATRIC REHABILITATION DIVISION

Rajashree Srinivasan, MD is the division director for the pediatric rehab division. She has been with UTSW since 2017 and has served as the Associate Medical Director for the Integrated Therapy Unit (Pediatric Inpatient Rehab Unit). The team includes Dr. Srinivasan, as well as Heakyung Kim, MD, Saylee Dhamdhere, MD, Laura Ridnauer, PA, and newly hired Annie Abraham, MD. Together, they cover both Children's Health Hospitals in Dallas and Plano, as well as clinics in Dallas (at Cityville) and Plano.

The field of Pediatric rehabilitation focuses on optimizing function in children which may include going back to playing sports, age appropriate play, getting back to school, or planning for college.

Merrine Klakeel, DO

PARKLAND OUTPATIENT PM&R CLINICS

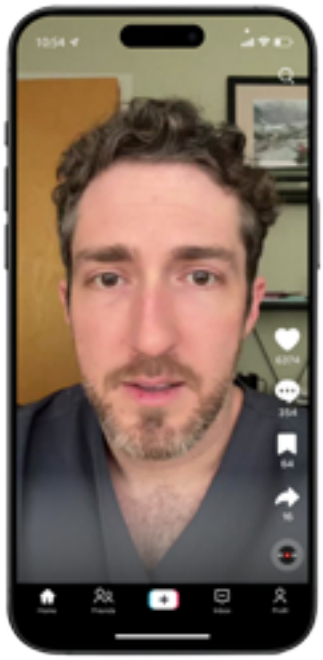
Parkland outpatient Physical Medicine and Rehabilitation (PM&R) Clinics have continued to grow in the number of subspecialty clinics under the PM&R umbrella over the years. **Merrine Klakeel, DO**, has been serving as Outpatient Director to lead the continued expansion of the PM&R program. In the past year, PM&R has expanded its outpatient clinics to include more providers and opened additional subspecialty templates at the Anderson Clinic Building and the Employee Health Center to improve patient access.

The Anderson outpatient clinics include General PM&R Clinic, PM&R Musculoskeletal and Spine Clinics with the capacity to perform in-office ultrasound-guided injections, and various Neurorehabilitation subspecialty clinics such as Cerebral Palsy, Spinal Cord Injury, Traumatic Brain Injury, and Spasticity Clinics. In line with the Parkland mission and vision, PM&R providers at Anderson Clinic deliver high-quality acute and chronic medical care for musculoskeletal and neurorehabilitation diagnoses to the residents of Dallas County while educating PM&R residents, equipping them to become future specialists in physical medicine and rehabilitation.

In addition to the Provider Resident Clinics, PM&R now has two nurse practitioners, T.A. Thomas, NP, and Kristin Marhee, NP, to help support the growing clinics. PM&R has increased its presence at Anderson and Employee Health with an increased number of MSK clinics run by Dr. Amanda Wise to meet the increasing demand. Dr. Minh Nguyen has also started a full-day clinic at the Employee Health Center to improve patient access for spine care.

Parkland Health and Hospital Systems' Anderson Clinic Building

AAPM&R 2024 Annual Assembly Recap



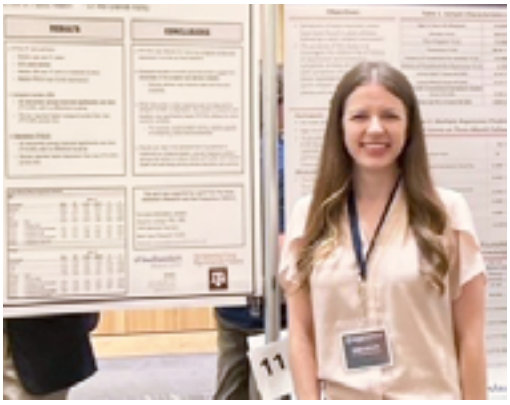
AAPM&R's Annual Assembly for 2024 was in sunny San Diego and featured the one and only, Dr. Glaucomflecken, who premiered his new video on how to ace your PM&R interview (https://www.tiktok.com/@drglaucomflecken/video/7434654086043110699). There was a great turnout from UTSW faculty, residents, and alumni. The fun continued with Dr. Kim showing off her wheelchair mobility at the Exhibitor's Hall. We had a great turnout at our UTSW Alumni Reception planned to perfection by Terri. It was great seeing current residents, current faculty, and meeting alums! Congrats to everyone who presented lectures and posters, and we look forward to seeing everyone again at AAPM&R 2025 in Salt Lake City!

From left to right: Dr. Heakyung Kim, Dr. Lindsey Kim, and Dr. Jasmina Solankee.

Back row, from left to right: Dr. Daniel Cai, Dr. Kayla Williams, Dr. Donald Kasitinon, Dr. Jeremiah West, Dr. Jason Petrasic, Dr. Nasser Ayyad, Dr. Jared Worchel, Dr. Mohamed Youssef, Dr. Gireesh Sharda, Dr. Amanda Stubbs.

Front row, from left to right: Dr. Jennifer Yang, Dr. Amanda Ly, Dr. Yoonhee Choi, Dr. Kelly Scott, Dr. Heakyung Kim, Dr. Saylee Dhamdhere, Arjun Barshikar, Swara Barshikar, Dr. Lindsey Kim, Dr. Amanda Seemann, Dr. Jasmina Solankee, Terri Isbell, Dr. Taras Ploskanych, Dr. Surendra Barshikar, Kristina Clements, Dr. Norman Pan.

RESEARCH UPDATES



Dr. Kristin Wilmoth has been hard at work with her research. She recently presented a couple of posters at the UT System Brain Research Summit in Austin. She continues to investigate topics related to TBI and Neurorehabilitation. She is looking at existing datasets belonging to the North Texas Concussion Registry (ConTex), Traumatic Brain Injury Model Systems, and Adolescent Brain Cognitive Development Study.

Kristin Wilmoth, PhD

Posters: *Effectiveness of a Bilingual Problem-Solving Training for Care Partners of Adults with Dementia* and *Emotional Factors Associated with Elevated Symptoms of Post-Traumatic Stress During Recovery From Sports Related Concussion*.

Dr. Isabel Huang and the department received a donation to help establish a comprehensive Ehlers-Danlos Syndrome Program from a grateful family. Some of this donation will be used to help further research in EDS and hypermobility.

Isabel Huang, MD

Dr. Yasin Dhaher's lab graduated his PhD bioengineering student, **Conner Hutcherson** who presented on "Exploring the Modulatory Role of Sex Hormones on the Joint Inflammatory Cascade in Response to Mechanical Loading."

Conner Hutcherson, PhD

Dr. Kowalske Finishes Term as AAP President

We sat down with **Karen Kowalske, MD** who is currently serving at the president of the Association of Academic Physiatrists (AAP). Dr. Kowalske has been part of the UT Southwestern faculty since 1990 and in her time here has been an integral part of the Physical Medicine and Rehabilitation community. Dr. Kowalske was not always planning on becoming a physiatrist, but a fortunate twist of fate helped bring the field of PM&R into her life. While in medical school, the University of Florida College of Medicine did not have a PM&R rotation and initially Dr. Kowalske was interested in either Orthopedic Surgery or Neurology. She did not even know about PM&R until a trip in medical school with a friend where they met up with mutual friend over dinner who happened to be going to PM&R. She enjoyed those other fields but ultimately wanted to assist more in people's function.

Throughout Dr. Kowalske's distinguished career she has seen a lot of changes to the field and is excited to see where the field is going! When she first started, elective joint replacements were starting to be done more consistently. Initially patients had to stay in bed until they could do a straight leg raise which was 4-6 weeks. This resulted in many complications such as DVT, debility and heterotopic ossification. They then required a one month inpatient rehabilitation stay to regain independence. She also noted that inpatient rehabilitation stays averaged 3 months. Obviously, now this is very different with some joint replacements being done as day surgery. The move toward early mobilization has been good for patients but has changed the nature of inpatient rehabilitation with a much higher acuity and shorter stays. PM&R is also evolving in the area of musculoskeletal medicine. The use of ultrasound for making diagnostic decisions like meniscal tears and shoulder impingement will position physiatry as the go to specialty for acute injuries as well as our traditional role in chronic musculoskeletal positions. Also combining ultrasound with electrodiagnostic testing for localizing nerve pathology has revolutionized the field. In her role as AAP president, she is pushing for increasing the scientific content of the meeting to highlight these exciting new directions. AAP is also positioning to be the leader in international residency education.

Even with Dr. Kowalske's focus on academic medicine she has made it a priority to be invested in leadership and helping the next generation of physiatrists. She has adapted to various leadership positions and learned that to best lead people you have to learn how to adapt to others styles and not just to your own. Part of leadership is "learning how to help people in way that is helpful to them" and to facilitate their success without micromanaging. For the next generation, she says it is important first and foremost to get involved either at the local or national level and offer up your skills to help advance the field.

Throughout her career Dr. Kowalske has been awarded numerous awards, spoken at many conferences, and served in many leadership roles, but the one award she says has made the biggest impact on her is The Patricia and William L. Watson Jr., M.D. Award for Excellence in Clinical Medicine. This award, which Dr. Kowalske received in 2023, is the highest honor in clinical care at UT Southwestern. About receiving this award, Dr. Kowalske says this is what all physicians should "strive for in your career" because providing excellent care to your patients is what this is all about. Even with so many high-level awards Dr. Kowalske recognizes that it is the consistent small things that add up to make a big difference. "No one does anything big in their life, what we do is a million small things. Any accomplishment is about what you do every day".

Dr. Kowalske at the 2025 AAP President's Reception in her home state of Florida.

Isabel Huang, MD

Yasin Dhaher, PhD

Philanthropic Gift for Hypermobility and EDS Care

Dr. Isabel Huang received a philanthropic gift to research and grow the care for people with hypermobility/Ehlers-Danlos Syndrome. She and **Dr. Yasin Dhaher** will develop ways to diagnose patients afflicted with hypermobility. Dr. Huang is also working on improving clinical access, providing multidisciplinary care, and further resources for this patient population.

Donald Kasitinon, MD

Leadership Training

Dr. Donald Kasitinon was accepted into two different leadership training programs for junior faculty. He will start the Leadership Emerging in Academic Departments (LEAD) program at UT Southwestern, which is a year long program. He will also be starting the 3 year-long Program for Academic Leadership (PAL) through the AAP.

BEST D 2024

D Magazine announced their 2024 Best Doctors and the list was full of our amazing faculty.

Kim Barker, MD
Physical Medicine and Rehabilitation

Surendra Barshikar, MD
Physical Medicine and Rehabilitation

Kathleen Bell, MD
Physical Medicine and Rehabilitation (Retired)

Renee Enriquez, MD
Physical Medicine and Rehabilitation

Fatma Gul, MD
Physical Medicine and Rehabilitation

Isabel Huang, MD
Physical Medicine and Rehabilitation

Donald Kasitinon, MD
Physical Medicine and Rehabilitation, Sports Medicine

Chaitanya Konda, DO
Pain

Karen Kowalske, MD
Physical Medicine and Rehabilitation

Susan Murphy, MD
Physical Medicine and Rehabilitation

Maria Fides Pacheco, MD
Physical Medicine and Rehabilitation (Retired)

Ankit Patel, MD
Physical Medicine and Rehabilitation

Kelly Scott, MD
Physical Medicine and Rehabilitation

G. Sunny Sharma, MD
Physical Medicine and Rehabilitation

Kavita Trivedi, DO
Physical Medicine and Rehabilitation

Parkland's 2024 EPC Physician of the Year

Dr. John Thottakara received the prestigious Parkland Health & Hospital System EPC (Employed Physician Council) Physician of the Year Award for Hospital/Inpatient Specialties from Parkland. Nominees for this award are made by the Parkland employees who then also vote for the winner. Dr. Thottakara won this award because of his extraordinary clinical skills and compassionate care that exemplifies the mission, vision, and values of Parkland.

Some of the comments from the nomi nations noted:

"Dr. Thottakara is one of the providers I have seen with empathy and sympathy who goes above and beyond to take care of the patients. All patients admitted to rehab may not have a safe discharge plan. But he always makes sure that they are in safe hands before they go."

"Dr. Thottakara's commitment to advanc ing health equity is reflected in his leader ship roles and his dedication to providing comprehensive care to all patients."

He has been a faculty member at UT Southwestern since 2009 and has served as Chief of Service of Physical Medicine and Rehabilitation at Parkland since 2011. He was recently promoted to Professor this past September.

Administrative Operations Team Update

The Administrative Operations Team (AOT) is a group of talented professionals who serve in various capacities, serving as the engine that drives the department to achieve our mission and vision to optimize quality of life and function through excellence and innovation in patient care, research and education.

The team meets regularly for discussions and feedback prior to any policy or operations changes being implemented.

AOT MEMBERS

Administrative Operations:
Suzanne Rubio
Lisa Sanchez
LaChandra Gorman
Tyhesha Price
Kianga Robinson

Education Operations:
Terri Isbell
Godley Johnson
Valeria Rodela

Finance Operations:
David Voss
Diane Hendricks

Research Operations:
Joshua Hambright
Misty Prince
Julie Yang
Victoria Castillo
Adriana Sanchez
Jennifer Bell-De Paz

The team has been thriving – learning and growing, while supporting the department. They also delighted to celebrate the department's accomplishments and camaraderie with a very festive holiday party.

New Department Faculty

We are excited to announce the new providers who started with our department this past summer/fall. We know they will be an incredibly important facet to patient care here.

Annie Abraham, MD

Dr. Abraham is an Assistant Professor in our department. She grew up in the metroplex, in Coppell. She attended the University of Texas Austin for her undergraduate studies, then UT Southwestern for medical school (and graduated with a distinction in Medical Education) and then PM&R residency where she also served as our Academic Chief. She then graduated from Children's National Medical Center for her Pediatric Rehabilitation fellowship. She has a passion for treating people with impairments from a stroke, in addition to the pediatric population.

Dr. Abraham (3rd from right) at the wedding of one of her co-residents.

Fun facts: Dr. Abraham enjoys soccer, although some close friends think she may enjoy tennis as well. Her videography and Powerpoint skills are on point, and Dr. Abraham gives the best hugs (Dr. Barker can confirm).

Princess Braggs, PhD

Dr. Princess Braggs is an Assistant Professor in the Department of Physical Medicine and Rehabilitation who serves as a neuropsychologist on the inpatient rehabilitation unit at Zale Lipshy Pavilion. She earned a master's and doctoral degree in clinical psychology with emphases in neuropsychology. For training, she completed an APA-accredited internship in adult neuropsychology as well as a two-year postdoctoral fellowship in rehabilitation and neuropsychology. Dr. Braggs' clinical work emphasizes the cognitive, psychological, and psychosocial assessment and treatment of patients with acquired brain injury, spinal cord injury, and other complex medical conditions. Her work spans both inpatient care and post-acute recovery, aiming to enhance health outcomes and optimize adjustment to illness and disability. She specializes in neuropsychological and brief cognitive assessment as well as individual, family, and group psychotherapy and education.

Princess Braggs, PhD

Fun facts: Dr. Braggs grew up in Terrell, Texas and enjoys DIY projects and karaoke.

Tulsi Pandat, MD

Dr. Pandat is an Assistant professor. She grew up in central Arkansas, but has been all over the US for her education. She did a surgical intern year in southern Los Angeles at Harbor UCLA, rehab residency at Kessler/Rutgers-NJMS in Newark, NJ, and brain injury fellowship in Houston at TIRR/UT Houston. She is passionate about Brain Injury Medicine whether acquired or congenital, traumatic or non-traumatic. She also enjoys interventional spasticity management with botulinum toxin, phenol, and cryoneurolysis.

Dr. Pandat on vacation in Chicago.

Outside of work, Dr. Pandat can often be found knitting her next project while watching her favorite shows or listening to an audiobook.

Amar Patel, MD

Dr. Patel is an Assistant Professor in our department. He grew up in the metroplex as well and is from Lewisville. He graduated from St. Mary's University for undergrad and then from Texas Tech Health Sciences Center at El Paso Paul L Foster School of Medicine. Dr. Patel completed residency at the University of Washington and then a Cancer Rehabilitation Fellowship at MD Anderson Cancer Center.

Amar Patel, MD

Interests outside of work include: soccer, pickleball, and traveling both within the US and around the world.

Emerging Leaders in Spasticity

A few of our residents got to participate in a national program dedicated to improving knowledge related to spasticity. The Emerging Leaders in Spasticity program is an exclusive program that helps train some of the best people in spasticity! We got to sit down and talk to two of our residents who are involved with the program, Alejandro Rodriguez, MD and Nguyen Tran, MD.

As described by Dr. Rodriguez, this program discusses "related to spasticity, from anatomy, to epidemiology, medication management, and procedural interventions." Dr. Tran was inspired to participate in this program after being involved in the adult cerebral palsy clinic where she loved the "mental exercise of figuring out" which muscles lead to which type of gait patterns and specific posturing! She hopes to master spasticity management in her future as she knows how beneficial it will be to her future patients. Each month they participate in a lecture where they can discuss various topics related to spasticity and talk about their experience with other residents around the country!

In the future Dr. Rodriguez hopes to take what they learned in this series to help give them the tools to educate their patients on their spasticity! Dr. Tran hopes to use this education in the future to analyze her patient's gait patterns to guide where they will perform specific injections!

It is very exciting to see what these two future leaders in spasticity management will achieve!

New Chief Residents

Congratulations to the new chief residents for the 2025–2026 academic year! **Lindsey Kim, MD**, **M. Imran Murtuza, MD**, and **Casey Salandra, DO** have worked hard during their time at UTSW and have been elected by their peers to lead this residency program forward over the next year.

We were fortunate to sit down with each of the new chief residents during their busy rotations to ask them a few questions about their experiences. Each of the new chief residents brings with them a new set of experiences and reasons why they chose to run for chief resident. All feel it is important to ensure the residency program is in a better place than when they found it. Dr. Kim says she wants to "help shape a residency program that future residents want to be part of," while Dr. Salandra emphasized that she wanted to "continue to make our program the best it can be." Dr. Murtuza has seen the program evolve since his days as a medical student and he wishes to help "advocate" for his fellow residents and "enhance the overall" experience of residency.

They all understand that this year won't be without its challenges, but Dr. Salandra says she will approach any challenge in a systematic and holistic way and develop "several options to solve" any problem. The goals they have for this year include advocating for changes that their co-residents wish to see in the program and increasing outside of work bonding relationships between everyone in the PM&R department.

Each of these fantastic leaders bring with lots of experience to help them in these roles. Dr. Salandra has served at the AOCPMR Medical Student and Resident Education committee chair for the past 4 years while Dr. Kim has chaired multiple interest groups and is the current chair for the recruitment committee. Dr. Murtuza has been involved with the PM&R Interest Group while as a medical student and served on the GME Housestaff Council and the Program Evaluation Committee.

Dr. Murtuza, Dr. Salandra, and Dr. Kim

While it is important to recognize the hard work these individuals have done for this program, it would be a disservice to ignore the interests they have outside of work. Dr. Salandra took a 6-week acrylic art class at a local Dallas Community Arts Center where she worked on a few paintings. Be on the lookout for her upcoming art show and maybe one day she'll be featured at the Dallas Art Museum! When Dr. Murtuza is not managing all the residents as the PM&R Programs fantasy football commissioner, he is busy scoring baskets and grabbing rebounds at the weekly pick-up basketball game. He also enjoys traveling the world with his wife and has plans to travel to Europe in December. Make sure to stop him and ask him about his travels! Dr. Kim on the other hand enjoys watching the University of Washington Football team where she was able to go to see her team in the College Football Playoff. You may have heard her sing the Husky Fight Song once or twice!

We are excited to have these leaders take over and we cannot wait to see what they accomplish. As Dr. Salandra likes to say "we rise by lifting others!"

Jason Petrasic, MD

Dr. Jason Petrasic is a graduate of UT Health Science Center at San Antonio and graduated from our residency program in 2016. He served on our faculty immediately upon graduation for a few years. After a stint in private practice, he now is enjoying his work at Texas Scottish Rite for Children as adjunct faculty for our PM&R Department at UTSW.

YOUR CAREER AND PRACTICE

Can you share a bit about your journey to specializing in pediatric musculoskeletal medicine and your current role at Scottish Rite for Children?

Although I've had a long-standing interest in musculoskeletal medicine, I admit I've taken a very unexpected and circuitous route to specializing in working with kids, and in particular primarily pediatric spine. While pursuing an initial interest specifically in sports medicine, I developed a strong interest in spine-related orthopedic care and spent much of my residency time in our MSK and spine clinics. I gained additional valuable experience managing adolescent patients with musculoskeletal injuries (both athletes and non-athletes) when in private practice. Those experiences, along with my non-surgical PM&R training and approach ultimately made me an attractive candidate for this position at Scottish Rite's Frisco/North campus. The large majority of these patients do not need surgery nor do they need to see an orthopedic surgeon, much like our adult spine clinics.

What inspired you to focus on conditions like scoliosis and spine disorders in children?

Very basically an initial general interest combined with opportunity. My first healthcare shadowing and internship opportunities were with a great mentor of mine who also happens to be a UTSW PM&R residency alum, Dr. Melvin Manning. He is a sports medicine and interventional spine specialist in the DFW area and exposed me to my first experience managing spine patients. My love for musculoskeletal care and the opportunity to work with kids made the position very appealing. I also saw it as a largely unrecognized and unfilled need in the pediatric realm. Most kids don't need surgical care, most surgeons seem to take generally less interest in non-operative care, and sports medicine and pediatric rehab specialists often have less interest in seeing spine patients. Kids are also very resilient, and more often tend to have a strong desire to get better. Not surprisingly, I have no shortage of patients, and my colleagues frequently let me know how much they appreciate having me on the team!

PAIN IN PEDIATRIC PATIENTS

Pediatric patients often experience pain differently than adults. How do you approach pain management in children with complex musculoskeletal conditions?

Younger kids typically have a harder time describing their pain, so I often ask more pointed questions while also giving them options or examples. Adolescents are actually remarkably good at answering questions. Parents can be a great source of collateral. One of the bigger challenges in treating pain in children is that many of them may be experiencing certain types of pain for the first time, and their ability to cope with and manage pain is often not well developed which can lead to anxiety and depression symptoms due to the impact on their typically active lives.

How do you balance the use of medications with non-pharmacological approaches for pediatric pain management?

I actually rely very little on medications. Over the counter medications tend to work quite well for

most kids. Although I often try to emphasize non-pharmacologic approaches early, they can be more a challenge because access is more limited.

How do you involve families in the process of managing a child's pain, and what resources do you provide to support them?

Families inherently play a major role. The parent needs to also understand the pain management plan in order to know how to respond when a child expresses pain. Making sure families understand the diagnosis and a clear plan for treatment is important. Physical therapists are also great at instructing parents on how to communicate with patients about their pain. I'm very luck and thankful to work for a non-profit charity organization that truly puts the patient first.

INTERDISCIPLINARY CARE

How do you collaborate with other specialties, like pain psychologists or physical therapists, in your practice?

It is a huge part of my practice and working at a place like Scottish Rite I am very lucky to have wonderful resources available to me under "one roof." I commonly help coordinate care with our staff pediatric physical therapists, psychologists, orthotists, radiologists, dietitians, orthopedic and neurosurgeons. I often also share patients communicating frequently with our pediatric rheumatologists and neurologists.

ADVANCING THE FIELD

You are involved in research on scoliosis and spine disorders. Can you share any exciting developments or ongoing studies that you're part of?

I'm currently putting together a manuscript for a multidisciplinary study I have been a part of looking at a little used fracture sequence available for use in MRI studies that provides CT-quality images of bone without the downside of radiation exposure. Also, I'm putting together research proposals for a study evaluating brace compliance in autistic kids with adolescent idiopathic scoliosis, and another evaluating the potential for external bone stimulators to improve healing rates in acute lumbar spondylolysis. Hopefully, more exciting and interesting developments to come in the future!

What do you see as the future of pain management in pediatric orthopedics?

It is a wide-open field! And there is a growing demand for well-trained pediatric non-operative physicians interested in treating patients with painful conditions. Most PM&R pain physicians receive training primarily seeing the adult population, and in performing interventional procedures. Procedures are used far less commonly in kids and there is more focus on pain management via other avenues.

ADVICE FOR PROVIDERS

For referring physicians, what signs or conditions should prompt them to refer a patient to a pediatric specialist like yourself?

Progressively worsening, more constant and severe pain, as well as pain worsened with sports or physical activities, especially in athletes, should typically prompt referral or further evaluation. "Red flag" symptoms (typically neurological or constitutional symptoms) are also reasons to consider more urgent work-up or referral (ED or specialist).

Medical Student Physical Exam Session

Back row, left to right: Dr. Ankit Patel, Dr. Donald Kasitinon, Dr. Kim Barker, and Dr. Niran Vijayaraghavan. Front row, far left: Y. Jordan Kenfack (student interest group president). Front row, far right: Dr. Amanda Seemann.

Several years ago, the medical school curriculum at UT Southwestern changed to decrease the amount of physical examination skills taught in the small groups (known as the Colleges). This unfortunately included cutting out the musculoskeletal (MSK) exam that the PM&R faculty and residents taught annually. However, for the last two years now, our faculty and residents have helped teach a Saturday session to interested medical students. On October 19, 2024, we were able to teach first through fourth year medical students wanting to master their musculoskeletal exam skills. Drs. Kim Barker, Donald Kasitinon, Ankit Patel, Amanda Seemann, and Niran Vijayarhagavan helped with upper extremity, spine, and lower extremity examination. Jordan Kenfack, the PM&R Student Interest Group President coordinated the morning's events and also participated in the learning. For the future, Dr. Barker is working with those in charge of the Colleges to have the MSK exam re-introduced into the curriculum.

PM&R Department Faculty, January 2025

NON-PEER REVIEWED

Kowalske K (medical consultant). "How Lagging Vaccination Could Lead to a Polio Resurgence" New York Times. Jan 13, 2025. https://www.nytimes.com/2025/01/13/health/polio-vaccine-outbreaks.html

Enriquez R (medical consultant). "Natural Pain Relief" Bottom Line Inc. Natural Pain Relief | Bottom Line Inc. January 4, 2025.

PEER REVIEWED JOURNALS AND CONFERENCE PROCEEDINGS

Barker K, Murtuza M, Sloan E. Three consecutive pregnancies in a woman with spastic cerebral palsy being treated with intrathecal baclofen. IJGO. 2024 Oct 16. DOI: 10/1002/ijgo.15988. PMID: 39475345.

Truong D, Pham T, Hynan LS, Neaves S, **Bell KR**, Juengst SB, Zhang R, Driver S, Ding K. Age-related smartphone use patterns among individuals with moderate-to-severe traumatic brain injury. Brain Inj. 2024 Jan 2;38(1):7-11. doi: 0.1080/02699052.2023.2295469. Epub 2023 Dec 20. PMID: 38117178.

Vargas GO, Neaves S, Pham T, Huang M, Turki AF, Wang C, **Bell KR**, Juengst SB, Zhang R, Li M, Driver S, Behbehani K, Hynan LS, Ding K. Community-based exercise program, self-reported health-related symptoms, and quality of life in persons with traumatic brain injury 45+years old. NeuroRehabilitation. 2024;54(3):373-381. doi: 10.3233/NRE-230223. PMID: 38457158.

Solankee J, Srinivasan S, Payne R, **Cai H.** Neuromuscular ultrasound in delayed sciatic neuropathy following hamstring tear. PM R. 2024 Dec 5. doi: 10.1002/pmrj.13294. Epub ahead of print. PMID: 39633251.

Jain NB, Cleland T, **Enriquez R, Gharib M, Kasitinon D, Konda C**, Schaaf S, Song A, Williams R, Ozcakar L. Art of Interventional Musculoskeletal Ultrasound. Am J Phys Med Rehabil. Nov 2024. 103(11):970.

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Williams R, Cleland T, **Enriquez R**, Gharib M, **Kasitinon D, Konda C,** Schaaf S, Song A, Ozcakar L, Jain N. Ultrasound-Guided Plantar Fascia (Perifascial) Injection Technique. Am J Phys Med Rehabil. Dec 2024. 103(12):e187

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Rajan SS, Yamal JM, Wang M, Saver JL, Jacob AP, Gonzales NR, **Ifejika N**, Parker SA, Ganey C, Gonzalez MO, Lairson DR, Bratina PL, Jones WJ, Mackey JS, Lerario MP, Navi BB, Alexandrov AW, Alexandrov A, Nour M, Spokoyny I, Bowry R, Czap AL, Grotta JC. A Prospective Multicenter Analysis of Mobile Stroke Unit Cost-Effectiveness. Ann Neurol. 2024 Dec 3. doi: 10.1002/ana.27105. Epub ahead of print. PMID: 39625067.

Kim E, Miles MVP, McMullen KA, **Kowalske K**. Comparison of Demographics Across the Burn, Spinal Cord Injury, and Traumatic Brain Injury Model Systems. Arch Phys Med Rehabil. 2024; 105(11):2160-2165. Doi: 10.1016/j.apmr.2024.07.012

Gormley M, Fehlings D, **Kim H**, ... **Gul F**, et al. Efficacy and Safety of OnabotulinumtoxinA for the treatmetn of pediatric upper and lower limb spasticity: results from 2 open-label, long-term extension trials. J Child Neurol. 2024. doi:10/1177/08830738241288431

Choe D, Humbert A, Wolfe E, ... **Kowalske K**, ... Yenikomshian HA. Pediatric Patients with Post-burn Amputations Report Worse Long-term Physical Function but Not Self-Appearance: A Burn Model System Study. J Burn Care Res. 2024; 45(6):1377-1382. doi: 10/1093/jbcr/irae164

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Stanton E, McMullen K, Won P, ... **Kowalske K**, Yenikomshian HA. Neuropathic pain after burn injury: a severe and common problem in recovery. Ann Surg. 2024; 279(5): 874-879. Doi: 10.1097/SLA.0000000000006146

Kumar RG, Delgado A, Corrigan JD, Eagye CB, Whiteneck GG, Juengst SB, Callender L, Bogner J, **Pinto SM**, Rabinowitz AR, Perrin PB, Venkatesan UM, Botticello AL, Lequerica AH, Taylor S, Zafonte RD, Dams-O'Connor K. The TBI Model Systems Neighborhood Socioeconomic Disadvantage Index (TBIMS-NSDI): Development and Comparison to Individual Socioeconomic Characteristics. J Head Trauma Rehabil. 2024 Aug 7. Epub ahead of print. PMID: 39110848.

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Hu X, Jiao B, **Pan X**, Nipp R, Jiang C. Illuminating the Value of Palliative Care in Cancer: A Path to Incentivizing High-Value Cancer Care. Ann Intern Med. 2024 Dec;177(12):1722-1724. doi: 10.7326/ANNALS-24-00702. Epub 2024 Nov 19. PMID: 39556838.

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Akhavan A, **Tzen YT**, Bogie KM (2024). Skin blood flow response to weight bearing in people with acute and chronic spinal cord injuries. Proceedings of the American Congress of Rehabilitation Medicine conference. Dallas, TX: ACRM Press.

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Juengst SB, Kumar RG, Holland A, Cohen A, Nelson TA, Corrigan JD, Sander AM, Per M, Perrin PB, Venkatesan UM, Rabinowitz A, Driver S, **Wilmoth K**, Teferiller C. Effects of home neighborhood tree canopy coverage on mental health outcomes: A Traumatic Brain Injury Model Systems investigation. Journal of Head Trauma Rehabilitation. In Press.

PRESENTATIONS

Barker, K MD "Reject Poor Functional Health – why your patient needs transplant rehabilitation" University of Kansas Physical Medicine and Rehabilitation Department Grand Rounds. Kansas City, KS.

Kim H. "When to call Pediatric PM&R: Enhancing Recovery and Development in Children" Pediatric Hospitalist Grand Rounds. Children's Health. Dallas, TX.

Nguyen, M MD "Advances in non-surgical management of back pain" Bass Symposium 2025: Emerging Technologies and Practices in Spine Surgery. UT Southwestern O'Donnell Brain Institute. Dallas, TX.

Pinto S. "Traumatic Brain Injury as a Chronic Disease: Impact on Cardiovascular Health and the Autonomic Nervous System". University of Alabama-Birmingham Physical Medicine and Rehabilitation Department. Birmingham, AL

ACRM 2024

Cai H, Pan X, Kim H. "Head & Neck Ultrasound Workshop: Addressing Unmet Needs in Non-musculoskeletal PM&R Practice-focused on Neuro-rehabilitation"

Kim H, Moskowitz J, Labhard S, **Pan X, Reyes, F** "Sexuality and Intimacy for Individuals Affected with Cerebral Palsy: A Multidisciplinary Approach to Enhance Quality of Life"

Turner E, **Kowalske K**, Roaten K, Bell-de Paz J. A Social Interaction Skills Training (ASIST): Introduction for Burn Care Clinicians.

Turner E, Roaten K, **Kowalske K.** Secondary Traumatic Stress in Burn Care Clinicians: Review of the Research and Recommendations for Practice.

Pinto SM, Champagne P, Sisto SA, Ji W. Navigating the Complexities: Autonomic and Cerebrovascular Responses Post-Central Nervous System Trauma

Pinto SM, Mahasin S, Thakur B, Champagne P. Cardiovascular Health in Persons with Traumatic Brain Injury

Murtaugh BM, Shapiro-Rosenbaum AM, Farris K, **Pinto SM**. Disorders of Consciousness Family Education Resource: Promoting Dissemination and Accessibility to Family and Caregivers.

Pinto SM, Katz LW, Zanca JM, O'Brien KH. The Rehabilitation Treatment Specification System (RTSS): A Framework for Multidisciplinary Rehabilitation Research Education and Clinical Practice.

Srinivasan R, Dubose B, Kelsey Z, Pathak A, Nguyen M. "Empowering Futures-Comprehensive Multidisciplinary Management for Pediatric Functional Neurological Disorders – A Case Study"

Javaid S, **Srinivasan R,** Klein E, Filoteo S. Special Symposium: Pediatric Award Lectureship: Optimizing Recovery: The Critical Role of Pediatric Rehabilitation Medicine and Therapies in Acute Care Settings

AAPM&R ANNUAL ASSEMBLY 2024

Kasitinon D, et al "Practical Applicaitons in Adaptive Sports Medicine Course"

Kim H, et al "STEP One: Ultrasound Clinical Applications of the Extremities Course Day 1 and 2"

Kim H, et al "Learning Center: Ultrasound Guidance for Craniocervical Chemodenervation Procedure"

Kim H, et al "Breaking the Ice with Your C-Suite: Let's Talk about ROI on APMs"

Pan X Oral Presentation

AAP 2025 (UPCOMING)

Kim H, **Kasitinon D**, et al. Musculoskeletal Ultrasound: A to Z (with some letters missing). Pre-Conference Workshop. 2/26/25

Kim H, **Cai, H**, **Fediw, M**, et al. Head & Neck Ultrasound Workshop for the Unmet Needs Conditions in Non-MSK PM&R Practice – Focused on Cancer Rehabilitation. 2/27/25

Barker K, et al. Nuts and Bolts: How to get your patients cancer rehabilitation and palliative care, from crafting referrals to building your own cancer rehab or palliative program. 2/27/25

Pinto S, et al. Autonomic Nervous System Dysfunction and Postural Orthostatic Tachycardic Syndrome (POTS) for Physiatrists: Emerging Research and Clinical Management. 2/27/25

Kowalske K, et al. From Intentions to Actions: Mastering Habit Development for Academic Physiatrists. 2/27/25

Kim H, et al. The Role of the Global Academic Physiatry Subcomittee (GAPS) in Supporting the Development of PM&R Training Programs: A Case Study in Nepal 2/28/25

Huang I, et al. Stretch Yourself! Diagnosis and Treatment in Hypermobility Disorders. 2/28/25

Patel A, et al. Tools to Increase Rehabilitation Access for Cancer Survivors. 2/28/25

Barker K, et al. Just Breathe – It's only Trivia! A review of pulmonary rehab in various populations. 3/1/25

Kowalske K, et al. Burn Rehabilitation – Integrating Science to Improve Outcomes. 3/1/25

Kowalske K. President's Lecture. 3/1/25

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